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Missouri Task Force Taking the Lead in Coordinating Emergency Response to Stroke and Heart Disease

Members of state's Time Critical Diagnosis Task Force determine best ways to improve Missouri's emergency response system based on other states' programs

Jefferson City, MO (**January 30, 2008**) – With heart disease and stroke making up one-third of all Missouri deaths in 2006, the state's leading medical experts have come together to save lives by improving emergency response and care.

The Time Critical Diagnosis Task Force, formed by the Missouri Department of Health and Senior Services and the Missouri Foundation for Health, will hold its second meeting January 31, 2008. The Task Force is charged with developing a statewide emergency response system for victims of stroke and ST-Segment Elevation Myocardial Infarction (STEMI), a common form of heart attack.

"This collaboration of state, private, and non-profit organizations have joined forces to improve Missourians' health and wellness," said Gov. Matt Blunt. "More than 100 participants have collaborated to ensure that those who suffer a stroke or certain type of heart attack get the right care in the right place in the right amount of time."

During the first meeting, six medical experts presented to over 100 participants representing dozens of organizations across the state. Presenters included Dr. Samar Muzaffar and Sherri Homan, RN, PhD, who discussed research on national stroke and STEMI response systems to determine how to develop a coordinated statewide system for Missouri.

STEMI sufferers who receive treatment within 30-90 minutes, and stroke victims who are treated within 180 minutes of symptom onset, have significantly greater rates of survival, reduced rates of disability and faster recovery times. However, only a small percentage of stroke and STEMI victims receive the recommended treatment within the recommended windows. In fact, nationally, fewer than 40 percent of STEMI patients reach the hospital and are treated in the ideal time frame.

Missouri currently has a trauma system that identifies specific hospitals as trauma centers. Studies show that such programs in various states have reduced the patient preventable death rate by 50 percent. Noticing the need to expand the program, states across the country started to



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create similar systems where stroke and STEMI patients are transported to hospitals identified as best equipped for their treatment.

States which have begun to implement a stroke or STEMI system include Alabama, California, Georgia, Florida, Illinois, Maryland, Massachusetts, Michigan, Minnesota, New Jersey, New York, North Carolina, Oregon, Pennsylvania and Texas.

With Missouri's heart disease and stroke mortality rates consistently higher than the nation's average, the Time Critical Diagnosis Task Force has an important mission of designing and implementing an effective stroke and STEMI emergency care system. This system will ultimately reduce long-term disabilities, speed up recovery times and save Missourians' lives.

The January 15, 2008 meeting included presentations from the following Missouri medical experts:

- Sherri Homan, RN, PhD, Chronic Disease Epidemiologist, DHSS
- George Kichura, MD, FACC, FACP, FSCAI, Medical Director, Cardiac Catheterization Lab, St. John's Mercy Medical Center and Heart Hospital
- Scott Duff, MD, Specialty Certification-Vascular Neurology, CoxHealth System Stroke Team Medical Director
- Karen Connell, Time Critical Diagnosis System, Heart Disease and Stroke Prevention Program, DHSS
- J. William "Bill" Jermyn, DO, FACEP, Medical Director, Emergency Medical Services, Director's Office, DHSS
- Samar Muzaffar, MD, MPH, University of Missouri Medical Center

The next Time Critical Diagnosis Task Force meeting will be held on January 31, 2008, in Jefferson City, Missouri.

About DHSS: The Missouri Department of Health and Senior Services protects and promotes quality of life and health for all Missourians by developing and implementing programs and systems that provide: information and education, effective regulation and oversight, quality services and surveillance of diseases and conditions.

About MFH: Established in 2000, MFH is the largest non-governmental funder of community health activities in the state. It is dedicated to serving the uninsured, underinsured and underserved in 84 Missouri counties and the City of St. Louis. For more information about MFH, visit www.mffh.org.

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